Name in Full

Certificate of Death

Ruth Eleanor Davis

Died at Town: Parkland County: Doyle MARYLAND

Date 189 Month: Mar Day: 12 | Age Y. 8 M. 5 D. | Native of MD | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ Widower | ~~Divorced~~ Number of children living

Husband of
Wife

Father's Name: Chas S Davis

Mother's Name: Sarah L. Davis

Cause of Death: Primary: Acute Asthmatic Bronchitis — How long sick: 1 week

Immediate: Heart Failure — 26 — Accident, Suicide, Homicide

Reported by: M. C. Hurlbaugh M.D.

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65988

Name In Full William A. Friend

Certificate of Death

Town

County

Died at near Sang Run Garrett Co. MARYLAND

Date 189 9 March 31 Age Y. 1 M. 2 D. 1 Native of Md. Occupation —

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name Richard Friend Mother's Name Mary F. [illegible] Cale

Cause of Death — Primary Pneumonia 72 — How long sick 12 days

Immediate Brain fever — ~~Accident, Suicide, Homicide~~

Reported by J. D. Henshaw M.D.

Address Oakland Md Garrett Co

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70858

Name in Full

William Carleton Hinebaugh

Certificate of Death

Died at Town: Oakland County: Garrett MARYLAND

Date 189[illegible] Month: Mar Day: 1 | Age Y. 37 M. D. | Native of [illegible] | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | Widow Widower | ~~Divorced~~ Number of children living

Husband of Wife

Father's Name: Wm C Hinebaugh | Mother's Name: Mollie Hinebaugh

Cause of Death: Primary: Pneumonia 72 | How long sick: 4 days

Immediate: " | Accident, Suicide, Homicide

Reported by: M C Hinebaugh MD

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65908

Name in Full William Jenkins

Certificate of Death

Died at Town Grantsville County Garrett MARYLAND

Date 189 Month Mar Day 17 | Age Y. 56 M. 3 D. 15 | Native of Maryland | Occupation Farmer

Male White Married ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 6

~~Wife~~ Husband of Louisa Durst

Father's Name

Mother's Name

Cause of Death: Primary La Grippe 9 — How long sick 2 weeks

Immediate Heart disease

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by H L Durst

Address Grantsville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 63968

Name In Full Mrs Martin

Certificate of Death

Died at Town Lonaconing County Garrett MARYLAND

Date 189 9 Month 3-3 Day Age Y. 43 M. D. Native of Occupation

~~Male~~ Female White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 8

~~Husband~~ Wife of John L. Martin

Father's Name Mother's Name

Cause of Death: Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Garrett Journal 3-9th

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70888

Rev. Geo. Boyer,

~~Post~~

Name in Full

Margaret - Riley

Certificate of Death

Died at Town Selbysport - County Garrett MARYLAND

Date 1899 Month 3 Day 4 Age Y. 80 M. 6 D. 4 Native of Selbysport - Occupation

~~Male~~ Female White ~~Colored~~ ~~Married~~ ~~Single~~ Widow ~~Widower~~ ~~Divorced~~

Number of children living 4

~~Husband~~ Wife of Geo Riley

Father's Name

Mother's Name

Cause of Death { Primary La grippe 9 Immediate Neuralgia of Stom- } How long sick 7 days

~~Accident Suicide Homicide~~

Reported by A. J. Thomas M.D.

Address Frederick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker ~~or minister~~. S Savage

LIBRARY BUREAU. F5868

Name in Full Christian Sanger

Certificate of Death

Died at Town Crellin County Garrett MARYLAND

Date 1899 Month 3 Day 19 | Age Y. 44 M. D. | Native of | Occupation

~~Male~~ / ~~Female~~ | White / Colored | Married / ~~Single~~ | ~~Widow~~ / Widower | ~~Divorced~~ | Number of children living 9

Husband of

Wife

Father's Name

Mother's Name

Cause of Death: Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Garrett Journal 3-23

Address [redacted]

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79985

Name in Full Benj. Specher

Certificate of Death

Died at Town Altamont County Garrett MARYLAND

Date 1899 Month 3 Day 16 | Age Y. 68 M. D. | Native of | Occupation

Male / Female | White / Colored | Married / Single | Widow / Widower | Divorced | Number of children living

Husband of

Wife

Father's Name

Mother's Name 161

Cause of Death — Primary: Complication of diseases — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Garrett Journal 8-28

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 79898

Rev. J. H. Fennis.

Name In Full Leonard Elsworth Tomasland — Certificate of Death

Died at Town Oakland County Garrett MARYLAND

Date 189 9 — Month 3 — Day 7 — Age Y. 34 M. 7 D. 14 — Native of — Occupation

Male / ~~Female~~ — White / ~~Colored~~ — Married / Single — Widow / Widower — Divorced / Number of children living

Husband of
Wife

Father's Name

Mother's Name 44

Cause of Death — Primary: Paralysis & Heart trouble — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Mountain Democrat

Address Oakland 3-9th

Must be signed by physician, if any In attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78808